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Name

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Topic

Accountable Care Organization

Comment

This comment pertains to the proposed Guidance for Medicare-only ACOs. In its Guidance the GMCB may have neglected to address 18 VSA 9572, which regulates meetings of an ACO's governing body. This statute makes no exception for Medicare-only ACOs. Also since Medicare-only ACOs don't need to be certified under Vermont law, the Guidance should contain a description of the remedies available to the GMCB should unsatisfactory answers be given in the budget submission. For instance, if the ACO has been found guilty of Medicare fraud, can the GMCB deny any and all budget submissions from the applicant and thereby prohibit the ACO from operating in Vermont? Or is the GMCB at the mercy of any ACO that has been approved by CMS? It would seem that the authority to approve a budget should extend to a determination as to whether any budget proposed by a specific Medicare-only ACO is in the best interest of Vermont Medicare beneficiaries, and in the best interest of Vermont's All Payer Model.

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